



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re U.S. Patent Application of

AKIMOTO et al.

Application Number: 10/757,588

Filed: January 15, 2004

For: IMAGE DISPLAY DEVICE

Attorney Docket No. HITA.0488

Unit 2629

Examiner  
Boddie, William

Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**COVER LETTER**

Sir:

[ x ] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	24	24	8 (Over 20)	x \$50	0
Independent Claims	1	1	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
			TOTAL		0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[ x ] Response to Office Action  
(without Claim Amendments)

[ ] Preliminary Amendment

[ ] Substitute Specification

[ ] Other \_\_\_\_\_

[ ] Petition for \_\_\_-month Extension of Time

[ ] Terminal Disclaimer

[ ] Letter to Draftsperson

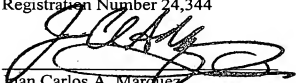
[ ] \_\_\_ sheet of replacement drawings

[ ] Request for Continued Examination

- [ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.
- [ ] A check in the amount of \$ \_\_\_\_\_ to cover the fee is enclosed.
- [ x ] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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